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Application Number	10/711077
Filing Date	8/20/04
First Named Inventor	Aldo A. Laghi
Title	Shaving Cream Applicator
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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OR

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.71(b) (Form PTO/SB/96) submitted herewith or filed on

SIGNATURE of Applicant or Assignee of Record

Signature

Date

Name

Aldo A. Laghi

Telephone

727-528-8566

Title and Company

President, Alps Intellectual Property Management, LLC

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 11 forms are submitted.

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